

CONTRACTORS LICENSE BOARD



Guahan Inetnon Manlisensiayen Kontratista 542 N. Marine Drive Suite A, Tamuning, Guam 96913 Tel: (671) 649-9676 /649-2211 /649-2214 or 649-2210 (Fax)

APPLICATION TO AMEND OR CANCEL LICENSE

Name of Applicant	Social Security Number	Contractors License Number
Mailing Address	Telephone Number(s)	Email Address
Name of Company	License Number	GRT Number
[] AMENDMENT	OR []	CANCELLATION
If Applying for Amendment, please compl	ete the following:	
New Name of Company		Telephone Number(s)
Company Mailing Address		Email Address
Office Location (Street Name, Bldg. No. Please – Not I	ot Number)	
Upon completion of application, you are req Taxation, Business License Section and Gros License Certificates and ID Card when su	s Receipts Tax Section. M	Just attach the Original Contractors
Signature of Applicant or Authorized Rep	resentative	Date
*****************************FOR O	FFICIAL USE ONLY	*********
Department of Revenue and Taxation		Department of Revenue and Taxation

Business License Section

Gross Receipts Tax Sections